File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM Fax: 515-281-4073 **DISCLOSURE SUMMARY PAGE** COMMITTEE NAME (Nust be some as on Statement of Organization) **FORM** DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (10) School Board or Other Political School Board Other PAC (10) School Board (Rev. 07/2007) REPORT For Office Use Only 11 ) Local Ballot Issue Comm. # **CANDIDATE COMMITTEES ONLY:** Logged 15 Candidate Name Political Party (if applicable) Scanned Computer District (if Senate or House) Audited de sections 68B 32A(7) and 68A 401(3), the car

| Late reports are subject to possible dan and annual penalues,   | ruidualit to itwa code sections cob.32 | A(r) allu our               | 40 ((3), the candidate, to a                         |
|---|--|-----------------------------|--|
| SIGNATURE OF PERSON FILING REPORT   | TELEPHONE                              | -                           | DATE SIGNED  |
| I AM FILING A JOW . 19, '09 (report date)   | REPORT FOR (1) ELECTION Indicate by    |                             | ELECTION YEAR.                                       |
| CHECK IF AMENDMENT TO REPORT DATED  |  | Local Comm                  | nittees, enter Date of Election                      |
| Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file   | e of Dissolution Form DR-3.<br>ed.)    | County & Lo<br>which Electi | ocal Committees, enter County in on is held NOODBURY |
| STATEMENT OF CASH ON HAI  | ND                                     |                             |  |
| CASH ON HAND at the beginning of the reporting period. ( committee. This amount MUST be the same as the of the last reporting period or must be zero if this is | e cash on hand at the end              | \$                          | 2.173 33   |
| ADD TOTAL MONEY TAKEN IN THIS PERIOD  | ,                                      |                             | , , 00   |
| Schedule A: Cash Contributions total (Attach Scho   | edule A) (*also see in-kind below)     | ,                           | 1401   |
| Schedule F: Loans Received total (Attach Schedu   | le F)                                  | •••••                       | •  |
| Schedule H: Total Sales of Campaign Property (A   | ttach Schedule H)                      | **********                  |  |
| (Schedule H applies to Candidates' Co   | mmittees Only)<br>SUB-TOTAL            | \$                          | 3580 <sup>33</sup>                                   |
| SUBTRACT TOTAL MONEY SPENT THIS PERIO   |  |                             | 33   |
| Schedule B: Expenditures total (Attach Schedule   | B) (**also see debts and loans below   | , 🗗                         | 3580   |
| Schedule F: Loan Repayments total (Attach Sche  |  |                             |  |
| CASH ON HAND at the end of this reporting period (if final r  |  |                             | -0-  |
| **UNPAID BILLS (From Schedule D - Attach Schedule D)  |  | \$                          |  |
| *IN KIND CONTRIBUTIONS (From Schedule E - Attach Sci  | nedule E)                              | \$                          |  |
| **OUTSTANDING LOANS (From Schedule F - Attach Sche  | dule F)                                | \$                          |  |
| CONSULTANT BREAKDOWN (Schedule G Attached?)   |  |                             | YESNO  |
| CANDIDATE COMMITTEES ONLY:  |  |                             | ·  |
| VALUE OF CAMPAIGN PROPERTY (From Schedule H - A   | ttach Schedule H)                      | \$                          |  |

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

| For Instructions | , See | Back | of | <b>Form</b> |
|------------------|-------|------|----|-------------|
|------------------|-------|------|----|-------------|

| CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds) | <b>A</b><br>(Rev. 07/03) | MONETARY<br>RECEIPTS         |
|---|--------------------------|------------------------------|
| COMMITTEE NAME (Must be same as on Statement of Organization)       | ٠٠٠ - المجتب             | CK THIS BOX IF<br>NDING FORM |

SCHEDULE

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR                              | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED | √ IF FOR<br>FUND-<br>RAISER<br>INCOME |
|--------------------------------|---|--|--|--------------------|---------------------------------------|
| 10/22/08                       | ID#   | Upspecified Cosh<br>Cintr. butions<br>Reggy & David Stilling |  | \$1020             |                                       |
| 7                              | ID#<br>CK#  | Reggy & David Stilling<br>706 W. Main<br>14 (9000, IA        |  | 25°C               |                                       |
|                                | ID#<br>CK#  | Tovesa O'Brien<br>701 Pierce St. #405                        |  | 50°                |                                       |
|                                | ID#<br>CK#  | David Semsky<br>USIB CM AVE<br>SOON CITY. IA                 |  | 1000               |                                       |
|                                | ID#   | Jackie Warnstadt<br>4628 Centre I Ave<br>Soon City IA        |  | 100                |                                       |
|                                | ID#<br>CK#  | Rondy Strait<br>2706 Joekson St                              |  | 30°                |                                       |
|                                | ID#<br>CK#  | Marie & Glone Welte<br>2014 Ropad Folle Rd                   |  | 25°                |                                       |
| >                              | ID#<br>CK#  | Eugene & Crinthia Bennet<br>2561 Afriche CT.                 |  | Zo <sup>e</sup>    |                                       |
| (                              | ID#<br>CK#  | Karen McCarley y 70 Benning Tober Sat Rinth JA               |  | 20°                |                                       |
| 10/22/08                       | ID#<br>CK#  | Rext Mana Rundgaist<br>3131 Norman Dr.D<br>Signa City FA     |  | 3000               |                                       |
| <u> </u>                       |   |  | SUB-TOTAL ge of this schedule)                   | \$322°°            |                                       |

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

### For Instructions, See Back of Form

| CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds) | (Rev. 07/03) | RECEIPTS                     |
|---|--------------|------------------------------|
| COMMITTEE NAME (Must be same as on Statement of Organization)       | -            | CK THIS BOX IF<br>NDING FORM |

SCHEDULE

MONETARY

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE                           | DAC ID NI IMPED   | AIAME AND ADDRESS OF CONTRIBUTOR              | DELATIONSUID                                     | AMOUNT !           | J IF FOR                              |
|--------------------------------|---|---|--|--------------------|---------------------------------------|
| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR               | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED | √ IF FOR<br>FUND-<br>RAISER<br>INCOME |
| 10/22/8                        | ID#<br>CK#  | John Gray<br>3801 Orchars St<br>Smax Com LA   |  | \$ 25°             |                                       |
| 5                              | ID#<br>CK#  | Covel Strait<br>2706 Jackson St.              |  | 25°E               |                                       |
|                                | ID#<br>CK#  |   | i  | 100 =              |                                       |
|                                | ID#<br>CK#  | Michell & Ann Hond<br>2636 5. St. Monys       |  | 2500               |                                       |
|                                | ю#<br>ск# 6144  | Northwest IA Labor Coard 3028 - Lakeport Dr   |  | 150°C              |                                       |
| 10/22/06                       | ск# 9673  | UFCW local 1142<br>Pabox 3151<br>Scoun CHY IA |  | 5000               |                                       |
| 10/27/06                       | ID#<br>CK#  | Deborah Yunker.<br>2325 Indian Hill-D         |  | 50°                |                                       |
| 7                              | ID#<br>CK#  | Unspectical Cosh<br>Contrabutions             |  | 85°E               |                                       |
| 1427/08                        | ID#<br>CK#  | Pot Heisterkonp<br>2610 E Solway              |  | 250                |                                       |
| 10/27/08                       | ID#   | CONNIET VOUM ACTBLOCE STOOLGHY IA WHYTHOUGH   |  | 100°               |                                       |
|                                | <u> </u>  |   | SUB-TOTAL  | s 1085°            |                                       |

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) . If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

## **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

|   | COMMITTEE                      | NAME (Must be  | same as on Statement of Organization)                              |  |                    |
|---|--------------------------------|--|--|--|--------------------|
|   | Smit                           | h fai Sa   | Devuisor   |  |                    |
|   | DATE<br>EXPENDED<br>(MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM<br>EXPENDITURE<br>(Disbursement) WAS MADE | PURPOSE<br>(DESCRIBE TRANSACTION)                                      | AMOUNT<br>EXPENDED |
|   | 10/27/08                       | ID#<br>CK#   | Woodbary County Dunon Party Source City IA                         | Hic Act blue Sence<br>Charge Traum<br>Contribution                     | \$ 396             |
|   |                                | ID#<br>CK#   | John Wight<br>Vie Pay Pol  | Web Site Hosting<br>Services   | 6293               |
|   | 10/2/08                        | ID#<br>CK#   | Caple ONE<br>SouxCHy   | Coble Statins  | 22000              |
|   | 12/16/08                       | ID#<br>CK#   | Jackie Smith<br>Saux City JA                                       | Keimbursement # 880°<br>Newspaper Ads: 880°<br>Volumer Report 99° Food | 1313               |
|   |                                | ID#<br>CK#   |  | Volunteer Recept 1349 Bevin  | Ø5                 |
|   |                                | ID#<br>CK#   |  |  |                    |
|   |                                | ID#<br>CK#   |  |  |                    |
|   |                                | ID#<br>CK#   |  |  |                    |
| 1 |                                |  |  | SUB-TOTAL  | \$358033           |
|   |                                |  |  | TOTAL (if last page of this schedule)                                  | \$ 2690 53         |

# THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

| Page | 1 | of   | <br>1 |
|------|---|------|-------|
|      |   | <br> |       |